LOS ANGELES COUNTY
DEPARTMENT OF MENTAL HEALTH
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SA 8 QUALITY IMPROVEMENT/QUALITY ASSURANCE (QI/QA) COMMITTEE
April 21, 2021
1:30-3:30 p.m.

Join Microsoft Teams Meeting
+1 323-776-6996; Conference ID: 691 014 664#

Co-chairs: Emily Ramos (LBMH), Michele Munde (Star View), Courtney Stephens (MHALA)
SA 8 QI/QA Liaison: Ann Lee; **QI Division Lead:** Jennifer Regan; **QA Division Lead:** Mark Borkheim

AGENDA
Please refer to the meeting slides for detailed information for each agenda item. Co-chairs were absent today due to meeting conflicts.

1.	**QA webpage**: https://dmh.lacounty.gov/qa/
	 ➢ Federal/State Updates
	     ➢ CURES
	     ➢ CalAIM
	 ➢ Training and Operations
	     ➢ Legal Entity Chart Reviews & New Online Video
	     ➢ Collaborative Documentation Training
	     ➢ Online Training Updates
	     ➢ QA Knowledge Assessment Survey
	 ➢ Policy and Technical Development
	     ➢ QA Emails Sent Out
	     ➢ Final QA Bulletin 21-02
	     ➢ Network Adequacy Updates
	     ➢ Taxonomy Codes Updates
	     ➢ NOABD Application for LE Updates
	     ➢ Authorization Reminders
	     ➢ Organizational Providers Manual Update
	     ➢ Translation of Forms in Process
	     ➢ Directly Operated Chart Reviews
	 ➢ Access To Care/Network Adequacy

2.	**QI Website** – https://dmh.lacounty.gov/qid/ ➢ CalQIC Report ➢ Regional Learning Collaborative ➢ Consumer Perception Survey update ➢ Reminder: Change of Provider Report - due by the 10th of each month

Next SA 8 QI/QA Meeting Info:
May 18, 2021
1:30-3:30 p.m.
Join Microsoft Teams Meeting
+1 323-776-6996; Conference ID: 691 014 664#

**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
SERVICE AREA 8 QI/QA COMMITTEE MEETING
04/21/2021
1:30PM-3:30PM**

Type of meeting:	Virtual monthly meeting via MS Teams
Meeting Recording:	Link to the meeting recording: http://lacountymediahost.granicus.com/MediaPlayer.php?clip_id=9069
Members Present:	See attached at the end of the minutes

AGENDA ITEMS	DECISIONS AND ACTIONS	RESPONSIBLE UNIT/STAFF	DUE DATE
Meeting sign-in	Link was provided during the meeting and on the slides to record attendance: https://tinyurl.com/SA8QualityApr21		
QUALITY ASSURANCE			
QA webpage	https://dmh.lacounty.gov/qid/		
Central Monthly QA/QI meeting	**Central QA/QI Meeting recording** 4/12/21 – https://lacountymediahost.granicus.com/MediaPlayer.php?clip_id=9049 **Next Central QA/QI meeting will be held on May 10th, 10:30am-12:00pm.** Link to the meeting was provided in the slides.		

Network Adequacy/Access To Care Live Meetings	**May 11, 2021 9 - 10:00 AM** Click the Link below to join. https://teams.microsoft.com/l/meetup-join/19%3ameeting_ZjY5MWUzMTMtMWIzZC00Y2QxLWFmMGMtNjE2MWQ0YjJhOTA5%40thread.v2/0?context=%7b%22Tid%22%3a%2207597248-ea38-451b-8abe-a638eddbac81%22%2c%22Oid%22%3a%226829d411-dcc3-4715-9a94-fa36ac9c9e4c%22%2c%22IsBroadcastMeeting%22%3atrue%7d **4/13/21 Meeting recording:** http://lacountymediahost.granicus.com/MediaPlayer.php?clip_id=9026 **Related documents:** NAPPA Scenarios 02-16-2021 FINAL.pdf NA-ATC Webinar FEB v5.pdf Quality Assurance Frequently Asked Questions Related to NAPPA 3.0_.pdf
Follow up questions from the SA 8 QI/QA meeting survey on 3/17/21	**Q1:** How do you access the NOABD online application to submit an NOABD once you receive access? *A2: The NOABD portal is in the same application as NAPPA* **Q2: May we be provided with updated guidance for what is billable service under Case Management Role, and concrete examples of Rehab (H2015) services for case managers?** *A2: Yes! Please see slide 7 for links to helpful information.*
Update 21st Century CURES Act	Under the 21st Century CURES Act and Federal ONC Regulations, there are requirements for Mental Health Plans and for Providers and different dates for each. ➤ LA County is working to clarify requirements it must meet as a Mental Health Plan (administrative) and as a Provider (clinical/EHRS), as well as how it all impacts Contracted Providers ➤ DMH realizes they need clarification to understand their responsibilities and impact on providers so will be developing a chart that provides clarification on responsibilities, requirements, and dates Interoperability and Patient Access Fact Sheet	CMS

Update CalAIM Proposal	High level overview of several important initiatives under DHCS CalAIM Proposal:
	Payment Reform:
	    ➢ Transition from HCPCS Level II coding to HCPCS Level I coding
	    ➢ **Timeline – Earliest possible July 1, 2022**
	
	Medical Necessity Criteria:
	    ➢ Update and clarify medical necessity criteria including allowing reimbursement of treatment before diagnosis
	    ➢ Clarify EPSDT protections and create criteria for children based on experience of trauma and risk of developing future mental health conditions
	    ➢ Develop a standardized screening and transition tool to determine Specialty Mental Health vs Medi-Cal managed care
	    ➢ "No Wrong Door" policy to ensure receive services no matter which delivery system where they seek services (may receive services from both systems in some situations)
	    ➢ Simplify and streamline documentation requirements to align with medical provider requirements (e.g., eliminate requirement for a point-in-time treatment plan)
	    ➢ **Timeline – January 1, 2022**
	https://www.dhcs.ca.gov/provgovpart/Documents/CalAIM-Proposal-03-23-2021.pdf

Legal Entity (LE) Chart Reviews Update	**Upcoming review**: Anne Sippi Clinic – April 26th – 30th
	
	Chart Review Checklists and Attachment A
	    ➢ Attachment A (chart review preparation instructions) updated to include additional items to be prepared based on newer requirements
	        o Needs evaluations
	        o Supplemental (IHBS, TBS, TFC) Assessments (if applicable)
	        o Confirmation of authorization for IHBS, TBS, TFC (if applicable)
	    ➢ Plan of Support Meeting (after the Exit Meeting) added to the process
	        • Discussion on next steps, including but not limited to:

	• How to implement change based on the recommendations from the Chart Review Summary Report, and • Setting timelines for follow up support by DMH and monitoring the implementation process
Training & Operations	**Collaborative Documentation Trainings** ➢ First general Collaborative Documentation training will be held on May 17, 2021 from 9:30 am – 12:30 pm *(note: already full at time of today's meeting)* ➢ Additional dates currently being coordinate **QA Knowledge Assessment Survey** ➢ Survey #3 answers/rationales and countywide results ➢ Sent out to LE QA Contacts last month ➢ Will be available soon on QA webpage ➢ Starting to develop Survey #4 ➢ Past surveys are posted at: https://dmh.lacounty.gov/qa/knowledge-assessment-surveys/ (#3 is not yet posted)

QA Updates	➢ Slide 16 has the training resources available online.
	➢ Slide 17: County of Los Angeles Quality Assurance emails that have gone out. Please lookout for those emails.
	  • Final QA Bulletin 21-02: Access to Care Expectations & Reminders - was sent out on March 1[8th]. Summarized in slides 18-24.
	    1. Timely Access to Care – will be based on IBHIS SRL, SRL Webservices, SRTS, and KAEMS
	      • No excel files will be accepted ▪ Timely data will be from Dec 1, 2020 – Feb 28, 2021
	      • No action is needed other than ensuring all data has been accurately submitted to DMH for this time period
	    2. Network Adequacy – will be based on data in NAPPA. Providers must verify information at least every month (e.g. end of the month)
	      • Must use the NAPPA Report to ensure all information is up-to-date and entered into NAPPA (i.e. no red flags)

	3. DMH will compile all the data for our MHP during the month of May and work with Providers if there are any questions/issues with the data. Note: While the submission is only for Mode 15 (Outpatient) providers, all providers should keep data up-to-date.
	4. Who should we contact with any questions about data? t to Providers.
	    • QA will use the Contact Information within NAPPA to reach out to Providers.
	    • Ensure this information is up-to-date for each provider site!
	
	Other notes:
	• DMH is using County holidays
	• If we leave vmail and clt calls back after the 10days. Policy requires 2 attempts made. After that, obligation is complete and SRL can be marked that unable to get a hold of the clt. When clt calls back, it is a new RFS and resets the clock
	• Use business days not including wknds/holidays for nonurgent appts.

Network Adequacy	➢ Network Adequacy Annual Certification: All Mental Health Plans (MHPs) in the State of California must submit evidence annually to certify their compliance with federal and state network adequacy standards which includes time, distance, and timely access to care.
	➢ Next State submission: June 1st
	    ○ Legal Entity providers should ensure the NAPPA report is up-to-date and does not have any red flags
	    ○ DO providers will have a three phase process for getting information up-to-date
	    ○ QA provided a NAPPA Training for DOs on April 20th. If you missed it, the video recording link will be sent out soon.
	➢ Access to Care/Network Adequacy Webinar was held on April 13th at 9:00am
	http://lacountymediahost.granicus.com/MediaPlayer.php?clip_id=9026
	➢ Taxonomy codes: see slide 26

NOABD Application for LE Providers	➢ Online application for LE providers to submit NOABDs has been created ➢ LE Providers can start requesting access through SAR (same application used to request access to NAPPA) on March 15th 2021 ✓ Patients Rights will no longer accept faxed NOABD as of July 1, 2021
ICC, IHBS, TBS Pre-Authorization	**Reminders:** ➢ As of March 1, 2021, claims will be denied for IHBS and TBS without prior authorization ➢ If a client has been authorized for IHBS/TBS, don't forgot to use the specific M-Auth number on claims instead of the general P-Auth ➢ A CFT is required for IHBS – it may have already occurred prior to the authorization request or be planned to occur at the time of authorization request

Organizational Provider Manual Updates	In the process of updating the Manual. Key updates include:
	➢ QA Bulletins – information from our bulletins are being incorporated
	➢ NOABD Issuance for No Medical Necessity – including that an assessment must be done to determine No Medical Necessity
	➢ Needs Evaluation - adding description and requirement
	➢ EPSDT Services – ICC, IHBS, TBS and TFC
	    o adding target population expansion of ICC and IHBS
	    o adding new requirements including the authorization process for IHBS, TBS and TFC
	    o adding description of Integrated Core Practice Model (ICPM) and Child and Family Team (CFT)
	    o adding the updated service components for ICC
	➢ Outpatient & Day Services Included Diagnoses & Inpatient Included Diagnoses - Removed from appendix and replaced with URL hyperlinks

Translated Forms and Documents	**Coming soon:** NOABD forms, Notice to Psychotherapy, Consent for TMS, PSC-35, Disclosure of Probation Status, Consent to Email, Secure Text Messing, Consent of Minor translated forms to multiple languages as shown on slide 30. Also available in multiple languages as shown on slide 31 are the Beneficiary Handbook, Notice of Privacy Practices, Acknowledgement of Receipt, Health Information Exchange – Change of Status, and the Consent for Staff/Intern Observation
PAVE	Slides 32-33 were left in from the March meeting as a reference.
DO QA Check-ins & Chart Reviews	Please see slide 34.

QUALITY IMPROVEMENT	
QI webpage	https://dmh.lacounty.gov/qid/
	❖ CalQIC Report ❖ Regional Learning Collaborative ❖ Consumer Perception Survey update ❖ Policy Update

CalQIC Highlights	**CalQIC Conference**
	    • First ever remote/online conference was held
	    • Highlights
	        • The CPS Report Draft Presentation
	        • Sharing of Social Media efforts across the state to respond to crisis – including LACDMH
	        • Some focus on COVID response and Telehealth
	    • The link to Online data Lifeline applications for clients and community members: https://www.connectcalifornia.com/internet-service/lifeline-income-chart-how-to-qualify
	    • The link to the meeting recording:
	https://web.microsoftstream.com/video/cce2016e-d308-4063-aba7-1008f2848eb5
	
	CalAIM is Coming:
	    • MAJOR Changes to the Medi-cal program – most of which are client centered and intended to improve access.
	        o https://www.dhcs.ca.gov/provgovpart/Documents/CalAIM-Proposal-03-23-2021.pdf
	Major areas of change include:
	    • **Payment Reform** – transition from a cost-based approach to a value-based intergovernmental transfer approach to reduce administrative burdens and increase flexibility
	    • **Medical Necessity** – Modify existing medical necessity criteria for both outpatient and inpatient services to align with State and federal requirements and ensure beneficiaries get the right care in the right delivery system

- **Administrative Behavioral Health Integration** - Each county would provide integrated mental health and SUD services through a single plan with integrated services delivery, infrastructure, and administrative functions.
- **Regional Contracting** - DHCS encourages counties to develop regional approaches to administer and deliver specialty mental health and substance use disorder services to Medi-Cal beneficiaries
- **DMC-ODS Program Renewal Policy Improvements** - DHCS proposes to update the DMC-ODS program based on experience from the first several years of implementation. Accordingly, DHCS proposes clarifying and/or changing policies to support the goal of improved beneficiary access to care, quality of care, and administrative efficiency.
- **SMI/SED Demonstration Opportunity** - DHCS proposes to assess county interest in pursuing the SMI/SED demonstration opportunity, as long as our systems are positioned to achieve the required goals and outcomes, including building out a full continuum of care to offer beneficiaries community-based care in the least restrictive setting. Counties would voluntarily "opt-in" to participate.

Addressing Disparities using Quality Improvement Strategies:
- Provided an example of use of a Performance Improvement Project to address disparities in outreach, engagement, and enrollment in the API population
- API penetration rates low statewide
- Provided an example of using special outreach workers and navigators to outreach to the API population
  - Walked through the stages of PIP development:
  - Identifying a topic
  - Development of an AIM statement
  - Identifying the PIP population
  - Describing the Sampling Method
  - Selecting the PIP Variables and Performance Measures
  - Describing the Improvement Strategy and Implementation plan

Law & Ethics – Key Takeaways

	➢ **Legislative Update**
	    o **Suicide Prevention training for licensure (eff. 1/1/21)**
	    o **Notification to Clients on how to make a complaint to the BBS (or appropriate licensure board) (eff. 7/1/20)**
	    o **SB 803 – Peer Certification (eff 7/1/22)**
	    o **AB 1963 – New mandated reporters for child abuse**
	        ▪ **A human resource employee of a business that employs minors**
	        ▪ **An adult person whose duties require direct contact with and supervision of minors in the performance of the minors' duties in the workplace**
	
	HIPAA
	➢ Review of the various layers of protection of PHI
	    o HIPAA
	    o Civil Code 56.10
	    o LPS – Mental Health (W&I 5328)
	    o H&S 120980 (HIV)
	    o 42 CFR Part 2 (SUD)
	
	Notice of Proposed Rule Making (NPRM) related to Privacy
	➢ Concurrent documentation is a good way to ensure a client is already aware of what is in their chart
	➢ New rules cover ease of access (electronic and written) as well as things like payment for records
	➢ Clients will soon be able to access their health information from their EHRs using an app of their choice (Cures Act)
	
	Substance Use Disorder Records (see slide 48)

Consumer Perception Survey	**CPS Draft Report** ➢ Redesigning the report to be more reader friendly ➢ Aims of redesign: o Evaluate what data are meaningful for various audiences and use to adapt existing products

	o Create multiple deliverables tailoring the level of information for different audiences o Reduce redundant or unnecessary information o Make information readily accessible to the public **CPS Deliverables** ➤ One-page consumer handouts ➤ Provider-level data reports ➤ Countywide and SA-specific data presentations ➤ Open-ended comments reports ➤ Brief report with Appendix **Spring 2021 survey period will be from June 21-25, 2021** ➤ CPS Spring and Fall 2019 and Spring 2020 data will be posted shortly ➤ Surveys will be online; working with CIOB on online surveys (paper available, online strongly encouraged). ➤ Please get your "C" number to access the survey portal. Portal isn't launched yet. Will likely have CPS in the name ➤ Survey is for outpatient clients. STRTPs are exempt.
Regional Learning Collaborative	➤ 5 providers in SA 2 to pilot: ➤ Review of timeliness data with children's providers identified/selected/agreed ➤ Review of Provider interventions as well as potential regional interventions and systems barriers
Change of Provider Logs (COP)	Please continue to submit (LEs email DMHCOP@dmh.lacounty.gov; DOs continue submitting via online app).
NEXT MEETING	Next meeting will be held on May 19, 2021 from 1:30PM-3:30PM.

Minutes Recorded by Ann Lee, DMH SA 8 Administration

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
SERVICE AREA 8 QUALITY IMPROVEMENT COMMITTEE (QIC) MEETING
04/21/2021
1:30PM-3:30PM

Members Present:

NAME	AGENCY/PROGRAM
Aaron Icedo	DMH San Pedro
Amy Sutherland	Aspiranet
Ana Viana	Starview Community Services
Analia Barroso	Telecare Corporation
Angela Lee	TIES for Families-DMH
Ann Lee (SA 8 QI/QA liaison)	DMH SA 8 Administration
Anna Galindo	Personal Involvement Center
Antoinette Washington	South Bay Mental Health Center
Belinda Williams	Tessie Cleveland Community Services
Brenda Miranda	Alma Family Services
Cherrelle Harris	Personal Involvement Center Inc
Cheryl Malinowski	Telecare
Claudia Morales	Pacific Asian Counseling Services
Colette James	SHIELDS for Families
Cristina Magarin	DMH, Contract Management and Monitoring Division
Cynthia Arias	South Bay Mental Health Center
Dalia Diaz	Helpline Youth Counseling Inc.
Danielle Lowe	SHILEDS for families
Daphne King	South Bay Childrens Health Center
David Worden	SHIELDS for Families
Debra DeLeon	SSG-OTTP
Della Clayburg	DMH SFC - South County
Denise Shook	Behavioral Health Services, Inc.
Dora Anderson	Harbor 6859 & 7738
Tiffany Harvey	Alafia Mental Health Institute
Efrain Marquez	Behavioral Health Services
Erica Julian	SHIELDS for Families
Esther Lee	CMMD/DMH
Evelyn Nankanja	Dream Home Care
Geralyn La Fleur	Personal Involvement Center
Gerardo Avila	Exodus Recovery, Inc.

Hala Masri	SSG Alliance
Helen Chang	DMH-Coastal API Family MHC
Jane Park-Aspe	Children's Institute
Janine Solano	Starview Community Services
Jeannie Thompson	Tarzana Treatment Center (Long Beach)
Jen Regan (QI Lead)	DMH QI Unit
Jennifer Mitzner	Olive Crest
Jesica Sandoval	AADAP, Inc.
Joel Solis	DMH QA Medi-Cal Certification
Josie Myles	Dimondale Adolescent
Joy Pate	CA Mentor
Kari Saenz	Dimondale
Karina Quintero	Shields for Families
Kathleen Villagomez	San Pedro Mental Health
Kreshawna Anderson	The Guidance Center Long Beach
Kristina Castellanos	Starview Community Services
Layhearb Poon	Long Beach APIFMHC
Linda Nakamura	Masada Homes
Lourdes Rabello	San Pedro Mental Health Clinic
Marc Borkheim (QA Lead)	DMH QA Unit
Maria Llamas	For The Child
Mariela Gorosito	Telecare
Martin McDermott	Bayfront Youth and Family Services
Natalie Anderson	ChildNet
Nicolette Bidlingmeyer	1736 Family Crisis Center
Nizhu Minhaz	Counseling4Kids
Patti Dilliner	Children's Institute, Inc.
Queta Allred	Didi Hirsch MHS
Rosa Diaz	Alma Family Services
Ruth Wen	DMH San Pedro
Sarah Monson	ChildNet
Shahana Osman	
Susan Osborne	MHALA
Susana Lutz	Rite of Passage
Tiffani Tran	Counseling4Kids
Trista Coleman	Rite of Passage
Xinyi Yuan	APAIT/SSG
Yessica Brown	Crittenton Services